

**TRANSMITTAL FORM***(to be used for all correspondence after initial filing)**Complete if Known*

Application Number	09/743,800
Filing Date	April 3, 2001
First Named Inventor	Olaf WILHELM et al.
Examiner Name	Hong Liu
Group Art Unit	1624

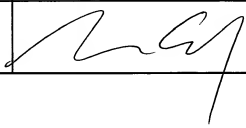
Total Number of Pages in This Submission	Attorney Docket Number	2923-122
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**ENCLOSURES (check all that apply)**

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| <input type="checkbox"/> Fee Transmittal Form                                | <input type="checkbox"/> Assignment Papers   | <input type="checkbox"/> After Allowance Communication to Group                            |
| <input type="checkbox"/> Fee Attached  | <input checked="" type="checkbox"/> Submission of Formal Drawing(s) & 6 Sheets               | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences        |
| <input type="checkbox"/> Amendment/Reply                                     | <input type="checkbox"/> Licensing-related Papers  | <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/> After Final   | <input type="checkbox"/> Petition  | <input type="checkbox"/> Proprietary Information   |
| <input type="checkbox"/> Affidavits/declaration(s)                           | <input type="checkbox"/> Petition to Convert to a Provisional Application                    | <input type="checkbox"/> Status Letter   |
| <input type="checkbox"/> Extension of Time Request                           | <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address      | <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):            |
| <input type="checkbox"/> Express Abandonment Request                         | <input type="checkbox"/> Terminal Disclaimer   | Copy of Submission of Translation of Priority Application filed 2/11/2003                  |
| <input type="checkbox"/> Information Disclosure Statement                    | <input checked="" type="checkbox"/> Request for Acknowledgment of Claim for Foreign Priority | Copy of Executed Declaration   |
| <input type="checkbox"/> Certified Copy of Priority Document(s)              | <input type="checkbox"/> CD, Number of CD(s)   |  |
| <input type="checkbox"/> Response to Missing Parts/ Incomplete Application   |  |  |
| <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 |  |  |

REMARKS:

OK to Enter

SUBMITTED BY		Complete (if applicable)			
NAME AND REG. NUMBER	Martha Cassidy, Reg. No. 44,066				
SIGNATURE		DATE	May 30, 2003	DEPOSIT ACCOUNT USER ID	02-2135